

Agricultural Business Training Program

2003 - 04 Application Form

Please print clearly and attach additional sheets if necessary.

Applicant Information (See "Confidentiality Statement" on last page)

Applicant's name _____

Name of agricultural business _____

Street address _____

Mailing address _____

Telephone: Day _____ Evening _____

Fax _____ E-mail _____ Web Site _____

1) How did you hear about the program?

2) How long have you been active in this business and how did you become a part of it? _____

3) Are you receiving business development services from any other source at this time (such as Farm Viability Program, a CDC program, Farm Credit services, or an SBDC/SBA program)? If yes, please describe:

4) Is the farm/ag enterprise your only/main source of income? ☐ Yes ☐ No

If no, what other sources of income do you have which require a substantial investment of your time and/or resources?

5) Does anyone else share in farm income? If so, who? _____

6) Who beside yourself must be consulted to make significant business decisions (sale/purchase of land, building construction, land use, etc.)?

Name

Relationship to you

7) Who in your business (other than yourself) may want to attend course sessions, on a space-available basis?

Name _____ Farm Role _____

Farm Profile (See "Confidentiality Statement" on last page)

1) Number of years in operation _____ Type of legal organization _____

2) Total number of acres/units (define) in production _____

3) Number of acres/units owned or leased (please indicate which) in specific crop production (e.g., 2 acres – hay, 6 acres row crops, 15 acres bogs, 25,000 largemouth bass etc.):

4) Approximate gross/net annual income from these activities (by category if possible) _____

5) Describe your business, identifying separate components (maple syrup, mail order, retail, wholesale, dairy, etc.):

_____6) Please describe any changes you have made over the last several years (e.g., production, operation, and/or new products/services) **and any changes you are considering now for this business that you will explore in this course:**

7) Who performs the following functions for your business?

Bookkeeping: _____

Taxes/Financial Statements _____

Other management functions (such as purchasing/inventory, hiring/firing, etc.)? _____

8) Number of employees: full-time _____ part-time/seasonal _____ non-paid _____

9) Do you have an on-farm computer (type/age)? _____ Does it have internet/e-mail access? _____

Do you have bookkeeping/accounting software on this computer (type)? _____

10) For what time periods are the following historical financial records available?

	Period beginning:	Period ending:
Tax returns	_____	_____
Income/expense ledger	_____	_____
Summary financial statements	_____	_____

Your Course Objective:

What are your objectives in taking this course? Please **circle a minimum of three areas** that you would like to focus on within the time frame of the course. Please **rate them in importance from 1 to 3**, with 1 the most important:

Strengthening Current Venture:

- | | |
|--|--|
| ?? Evaluate existing product mix and/or current production systems | ?? Involve family in decisions |
| ?? Analyze profit/loss centers and use break-even indicators for operational decisions | ?? Learn about risk management |
| ?? Develop financial planning skills | ?? Reevaluate business structure |
| ?? Prepare for farm succession | ?? Run business more efficiently (create more free time) |
| ?? Become/Continue to be eligible for FSA or other source of financing | ?? Conduct market research |
| ?? Set-up bookkeeping/payroll system | ?? Define needs and sources for technical assistance |
| ?? Other: _____ | |

Evaluating New Ventures

- ?? Develop new product options (indicate current ideas):
- ?? Conduct a feasibility study for potential new venture (describe):

Overall, what do you need from this course to strengthen the economic viability of your enterprise?

Additional comments that you feel may help us evaluate/understand your interest in and/or expectations for this course:

Enrollment Information

Tuition

While most of the program cost is underwritten through an award from the Massachusetts Department of Food and Agriculture, each participating business pays tuition of \$300. If your farm is not located in MA, please contact the Director for out-of-state fees and services. We request payment when your application is processed to reserve your space. Your check will not be cashed until two weeks before the course begins. Your check will be returned if we are unable to accept you into this particular session, or if the course is cancelled. We reserve the right to select applicants whose projects will best be served by this program.

Applicant Agreement to Program Requirements

Students will be expected to:

- 1) Prepare and discuss with your Instructor historical financial records that will serve as a confidential base-line for your plan
- 2) Attend a pre-course orientation/financials workshop
- 3) Miss no more than one course session
- 4) Complete "homework" assignments between sessions, seeking additional help to do so as needed
- 5) Complete and submit a copy of your business plan for confidential review

Confidentiality Statement

All financial records and business plans will be kept confidential and will not be discussed in class (unless you choose to use specific examples). The purpose of submitting your historical financial information for individual review with your Instructor is to help you clarify the current status of your farm finances to determine how the program can best assist the development of your business plan. It is important that you know your real capacity to implement your plans, and it is important that you separate out personal assets that should not be placed at risk in your business (unless you make an informed choice to do so). You will use this information to help focus your work throughout the course. The program instructor will review your business plan during and after completion to help you identify where you need to conduct additional research and obtain technical assistance. Business plans may be reviewed by the Program Director at the Massachusetts Department of Food and Agriculture for program documentation/evaluation purposes. Plans will not be duplicated or distributed. You may choose to give specific written permission for a sanitized (unidentifiable to you or your specific business) copy to be used as a generic future case study by other learners. If you have any concerns or questions about any of the program requirements, please contact the Program Director (Rick Chandler) at 413-577-0459.

Your signature below indicates your understanding of these terms.

Signature _____

Date _____

Program Acceptance

We will contact you by phone if we have questions about your application information and to notify you about your acceptance into the program.

Please mail your completed application to:

MDFA/ABTP; Rick Chandler, Director; 25 West Experiment Station; UMass; Amherst, MA 01003

Phone: 413-577-0459